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APPLICANTS

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\*\* CONTINUING DATA *YES, A.P.* \*\*\*\*\*  
 This appln claims benefit of 60/262,689 01/19/2001

\*\* FOREIGN APPLICATIONS *NO, A.P.* \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
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35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	Verified and Acknowledged	Examiner's Signature <i>[Signature]</i>	Initials A.P.	

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TITLE  
 Open-loop power control enhancement for blind rescue channel operation

FILING FEE  RECEIVED 1616	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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